

Supply and demand of Public Health courses in the framework of life long learning in Europe

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INTRODUCTION

It is of utmost importance to ensure that professionals are equipped with skills and competencies which are needed to operate effectively in the 21st Century¹. This is especially relevant for Public Health which is a dynamic field that has to meet challenges posed by new technological developments, evolving expectations of the labour market and new health threats. This requires a reconsideration of working and learning patterns which have a clear impact on various social institutions and organisations. More flexible modes of programme delivery are crucial for training of the wider public health workforce². Therefore, the concept of Life Long Learning (LLL) can be of great interest since it is clearly linked with the idea of improving human potential and development. It is generally accepted that LLL is an imperative for individuals and societies in a knowledge-intensive society and that it has far-reaching positive effects that go beyond simple economic issues³. LLL system and technology-supported learning are a cost-effective strategy to achieve workforce competence⁴. LLL plays a vital role in the economic and social strategy of Europe. However, only 10% of the adult population in the European Union 27 (EU27) participate in LLL⁵. Many countries are putting in place measures to support and encourage and, in some cases, to require continual updating of skills and knowledge⁶. However, LLL practice has not yet reached its full potential in relation to the Public Health arena⁷.

For the European region, there is no systematic evidence about the supply-demand gaps in public health courses delivered by the academic institutions including Schools of Public Health (SPH), or other teaching institutions. In this context, we undertook a pilot study whose aim was twofold: (I) to assess the supply of public health courses in the framework of LLL in the European educational market, and; (II) to determine whether the existent supply meets the expectations of the public health workforce.

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METHODS

- **Study design:** An online survey about supply and demand for LLL courses in the public health area was conducted in spring 2009.
- **Study population:** We targeted all SPHs (N=79) in Europe which are members of the Association of Schools of Public Health for the European Region (ASPHER) and all members of the European Public Health Association (EUPHA) [N=37]. Out of 79 of the ASPHER members, 45 institutions participated in our survey (response rate 57%), whereas out of 37 EUPHA members, 20 institutions participated (response rate 54%).
- **Data collection:** The survey consisted of two instruments (questionnaires). The first questionnaire, addressing the SPHs, asked about the existing supply of LLL courses and the means of provision [a full version of the questionnaire is available at: www.aspher.org/pliki/pdf/LLL_Liane.pdf]. The second questionnaire, addressing the EUPHA members, enquired about the demand for different LLL courses, their structure, mode of provision and teaching methods preferred⁸. The survey offered the option to divide the courses into three categories: public health speciality, behavioural/interpersonal and generic transferable⁹.
- **Statistical analysis:** Descriptive statistics were used to present the distribution of the supply and demand for LLL courses in public health in the institutions included in the survey.

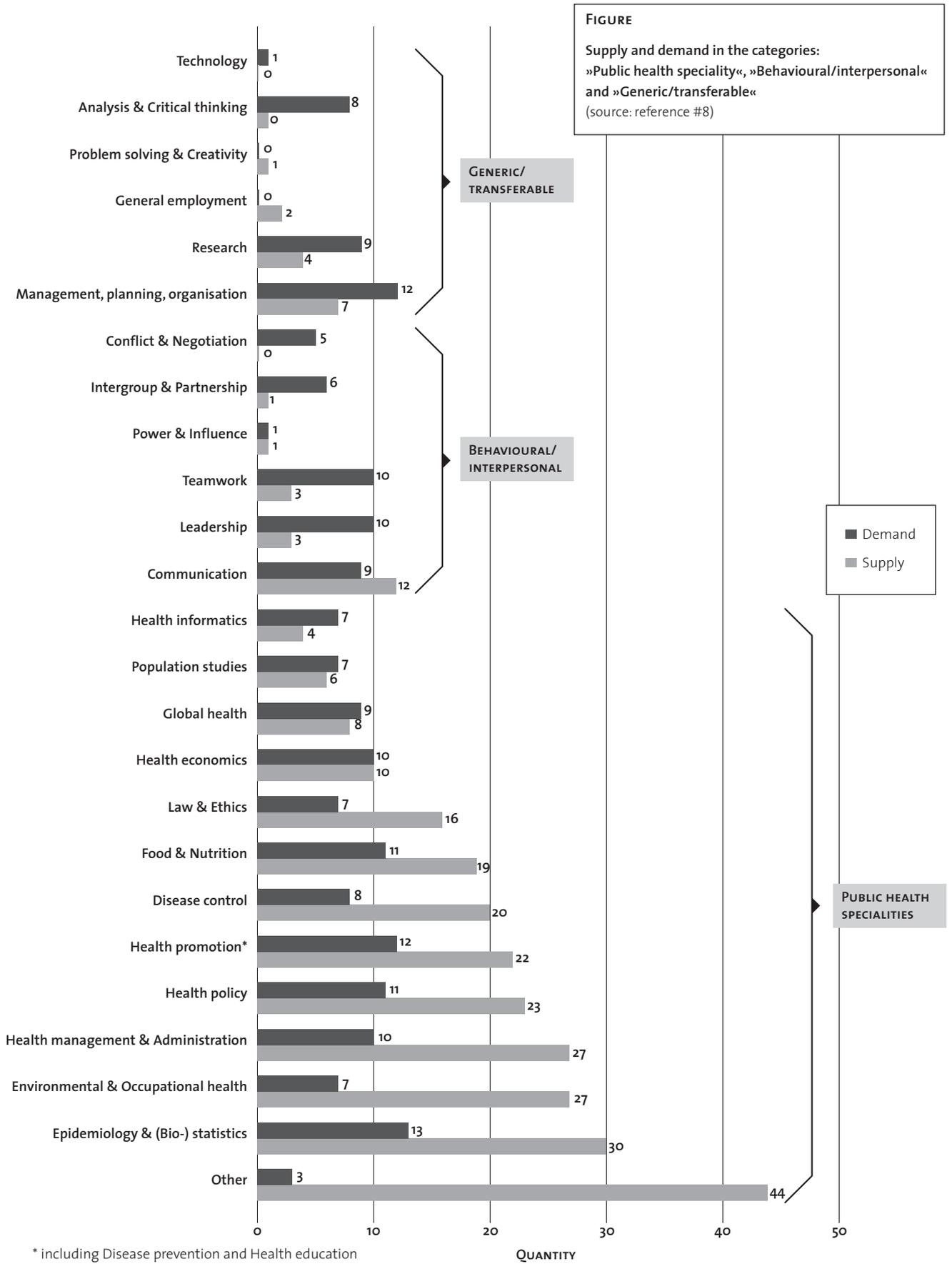
RESULTS

27 schools of public health submitted courses. Overall, 291 courses were reported of which 212 were provided in public health specialities, 20 dealt with behavioural/interpersonal competencies, 15 were about generic/transferable competencies and 44 courses from other areas (Figure).

Abstract

ANGEBOT UND NACHFRAGE FÜR PUBLIC-HEALTH-LEHRGÄNGE IM RAHMEN DES LEBENSLANGEN LERNENS IN EUROPA

Eine Online-Befragung über das Angebot und die Nachfrage für Public-Health-Lehrgänge im Rahmen des lebenslangen Lernens (LLL), an der sich 45 Ausbildungsstätten für öffentliche Gesundheit und 20 Mitglieder der Europäischen Vereinigung für Öffentliche Gesundheit EUPHA beteiligten, zeigte Lücken zwischen Angebot und Nachfrage für die lebenslange Weiterbildung im Bereich der öffentlichen Gesundheit auf. Die am stärksten nachgefragten Bereiche waren: »Management, Planung und Organisation«, »Führung«, »Teamarbeit«, »Forschung« und »Analytisches und kritisches Denken«. Die Ergebnisse dieser Pilotstudie können als Ausgangspunkt für eine eingehendere Untersuchung des Themas LLL im Kontext der öffentlichen Gesundheit in Europa genutzt werden.



Courses which were provided most in »Public health specialities« were courses in »Epidemiology & Biostatistics«, »Environmental & Occupational Health« and »Health Management & Administration«. In the »Behavioural/Interpersonal« domain most courses were provided in »Communication« whereas in all other areas of this section only few courses were provided. In the »Generic/Transferable« domain again few courses were listed, outstanding here were courses in »Management, Planning, Organisation« and »Research«.

From the demand side, 21 responses were obtained. The demand of the public health workforce was equally distributed between the three specified categories. Asked for areas that should be covered by schools of public health in the category »Public health specialities« the following courses were rated as highest: »Epidemiology & Biostatistics«, »Health Promotion/Disease Prevention/Health Education«, »Food & Nutrition« and »Health Policy« (Figure 1). On the other hand, courses in »Law & Ethics«, »Population Studies« and »Occupational Health« were rated to a lesser degree. In the domain »Behavioural/Interpersonal« »Leadership«, »Teamwork« and »Communication« were confirmed as being important whereas courses covering »Power & Influence« were rated less. In the category »Generic/transferable« areas that should be covered by LLL courses were »Management, planning, organisation« and »Research«. No interest was aroused for courses in the areas »Problem Solving & Creativity« and »General Employment« (Figure 1).

DISCUSSION

The findings of the study suggest that, with respect to the demand side, deficit areas exist between the supply and demand of LLL provision in the Public Health area. The SPHs stated a multitude of courses which they labelled as LLL courses for the public health workforce which in fact were a part of the regular university-curricula and hence, part of bachelor and master programmes. The schools are more likely to offer a majority of courses in »traditional« public health areas such as Epidemiology & Biostatistics or Health Management which indicates that the courses are not fully tailored to an experienced public health workforce which demands new knowledge. The most required topics areas on the demand side were: »Management, Planning, Organisation«, »Leadership«, »Teamwork« and »Research«. The deficit areas may be explained by the fact that the schools consider knowledge in these fields as not relevant to Public Health. A recent study showed that Public Health specific competencies are useful when entering working life in public health⁹. In working life, however, behavioural/interpersonal and generic/transferable competencies are increasingly valued by the employers.

Overall, the deficit areas may be explained by the fact that little knowledge exists about the demand of the Public Health workforce in terms of LLL, but also by the neglect on the part of the SPHs to ask about the demand of the workforce when designing the LLL curricula. However, it should be noted that participating institutions represented different European countries and may interpret Public Health and also the concept of LLL differently depending on historical, cultural and political influences⁷. This means that each country has its own perception about the expectations of the workforce and LLL. The findings of this study can serve to investigate this topic further by determining the impact of specific LLL provision on practice outcomes and whether it is change conducive. However, our study provides very general results related to the Public Health subject areas and, therefore, it would be of major interest to find out very specific needs that have not been precisely articulated and meet them accordingly. Finally, the identified gaps may indicate that adult education and LLL may help prepare flexible public health practitioners for risk and uncertainty¹⁰. In order to be competitive in the global economy public health professionals require skills and competencies which may lead to behavioural change of individuals equipping them with entrepreneurial capabilities impacting a positive change in their professional practice¹⁰.

CONCLUSION

We obtained evidence on the current status of the supply and demand of public health courses in the framework of LLL in the European educational system. Several deficit areas and gaps between the supply and demand of LLL provision in public health were identified and pointed out. Findings of our study can be used as a starting point to explore in-depth the LLL topic in the European Public Health context. Our study reinforces the pressing call for development of training activities and programs which would help to translate research into practice, policy and education.

KEY POINTS

- Little is known about the supply-demand gaps in public health courses delivered in European institutions.
- An online survey about supply and demand for LLL courses in the public health area included 45 Schools of Public Health and 20 members of the European Public Health Association.
- This pilot study obtained evidence of deficit areas between the supply and demand of LLL provision in public health.
- The most required areas on the demand side were: »Management, Planning & Organisation«, »Leadership«, »Teamwork«, »Research« and »Analytical & Critical thinking«.
- Findings of this pilot study can be used as a starting point to explore in-depth the LLL topic in the European public health context.

CONFLICTS OF INTEREST: none declared. ■

REFERENCES

- 1) van Merriënboer JGG, Kirschner PA, Paas F, Sloep PB, Caniëls MCI. *Towards an Integrated Approach for Research on Life Long Learning*. Educational Technology (May-June 2009); pp.3-14.
- 2) Evans D. The role of schools of public health: learning from history, looking to the future. *J Public Health* 2009;31:446-50.
- 3) Groot W, Maassen van den Brink H. The health effects of education. *Economics of Education Review* 2007;26:186-200.
- 4) Lichtveld MY, Cioffi JP, Baker EL Jr, et al. Partnership for front-line success: a call for a national action agenda on workforce development. *J Public Health Manag Pract* 2001;7:1-7.
- 5) European Commission. *Communication from the Commission to the European Parliament, the Council, the European economic and social committee and the committee of the regions*. European Commission, 2008. http://ec.europa.eu/education/lifelong-learning-policy/doc/com865_en.pdf (accessed 22 August, 2009).
- 6) Merkur S, Mladovsky P, Mossialos E, McKee M. *Do lifelong learning and revalidation ensure that physicians are fit to practise?* European Observatory on Health Systems and Policies, 2008. www.euro.who.int/document/hsm/9_hsc08_epb_12.pdf (accessed 08 March, 2010).
- 7) Organization for Economic Cooperation and Development. *Education at a Glance – OECD Indicators*. Paris: OECD Publications, 2001. Available from: www.oecd.org/document/11/0,3343,en_2649_39263238_2672843_1_1_1_1,00.html (accessed 11 January, 2010).
- 8) Liane Mikeska. *The Supply and Demand of Public Health Courses in the Framework of Lifelong Learning in Europe: A Questionnaire Study*. Bachelor thesis, 2009. Faculty of Health, Medicine and Life Sciences, Maastricht University, The Netherlands. Available from: www.aspher.org/pliki/pdf/LLL_Liane.pdf (accessed March 08, 2010).
- 9) Biesma RG, Pavlova M, Vaatstra R, Van Merode GG, Czabanowska K, Smith T, Groot W. Generic Versus Specific Competencies of Entry-Level Public Health Graduates: Employers Perceptions in Poland, the UK, and the Netherlands. *Adv Health Sci Educ Theory Pract* 2008;13:325-43.
- 10) European Communities. *Key Figures on Europe*. European Communities, 2008.